PROPOSED REGULATION AMENDMENT

- First talked to Don Olson in 1988 to discuss inactive injection wells in Osage County. He had no problem with changing regulations to look like generics with respect to P & A.

- In June 1989 submitted proposal to Mike Cook for formal HQ action. We have revised that proposal to more closely match the generic regulations. HQ (usually Don Olson) has consistently stated that there is no technical objection. Some concerns have been raised concerning why we want to change (e. g., regulations adopted as is to take care of Indian concerns and to be equivalent to state program, objections to our motives for changing the regulations).

- Al Havinga notes concentrate on waive MIT requirements. This would be allowed according to Guidance 78. Also, we would be assuring protection of USDWs by fluid level monitoring at least quarterly. This more protective than a five-year MIT.

- We are recommending formal proposal in the Federal Register of revised UIC regulations

  * The Osage Tribe supports regulatory flexibility in the area of plugging and abandonment of well bores. Open well bores could be useful if the price of oil makes enhanced recovery methods attractive at some future date.

  * We would be compliant with our regulations.

  * 1500 inactive injection wells in Osage County. The vast majority are being monitored to assure protection of USDWs. These are past due for plugging according to EPA regulations.

  * The proposal would continue to be consistent with the Oklahoma UIC requirements and regulations applicable to other Indian lands in Oklahoma.

  * Guidance No. 78 allows alternative monitoring to show no endangerment to USDWs if a well is not TAd "as is".

  * Region 6 monitoring requirements for TAd wells prevent contamination of USDWs.

  * Region 6 field presence in Osage County allows close scrutiny of the injection well monitoring to identify situations where appropriate monitoring is not occurring or conditions present an endangerment situation.

  * Strong Region 6 enforcement program.